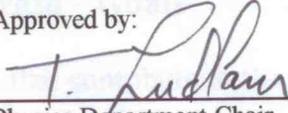


Approved by:	
	5/7/08
Physics Department Chair	Date
	5/13/08
Associate Lab Director for NPP	Date

Physics Department, BNL
ESSH Self-Assessment Program
Department Summary
Fiscal Year 2008

The Physics Department at Brookhaven National Laboratory performs basic research targeted at advancing the frontier of scientific knowledge on the structure of matter. The Department is organized into research *Groups* with either an *Experimental* or a *Theoretical* focus in Nuclear and Particle Physics. The Experimental groups lead world-renowned activities at BNL-based facilities, including our own Accelerator Test Facility, as well as at other major research laboratories. The Theoretical groups are at the scientific forefront in advancing new concepts in understanding the physical universe. The Physics Department also hosts the RIKEN - BNL Research Center and the RHIC and ATLAS Computing Facilities. The staff and these activities attract a large number of scientists from around the world, and the Department supports an active visitor program to foster both national and international exchanges.

The primary outputs of the Department are:

1. Leading-edge scientific knowledge;
2. Key ideas and concepts for future research directions, for the Laboratory, the Nation, and the World Scientific Community;
3. New scientists that receive training and experience from the Physics Department's research programs.

The Physics Department services the following *customers* and *stakeholders*:

1. The DOE, in support of its mission in Energy Research;
2. The U.S. scientific community, as well as the broader World-based research community;
3. Brookhaven Science Associates in its efforts to carry out the mission of Brookhaven National Laboratory;
4. Other BNL Departments, in providing leadership and expertise needed to carry out important research programs.

Self-Assessment Program - Goals

The Physics Department has established a set of goals that contribute to the Institutional Plan of the Laboratory:

1. Continued excellence in scientific research and commitment to advances in scientific research;
2. Maintenance of a collegial atmosphere, which aids in the recruitment and retention of leading scientists, and in which new ideas and breakthroughs can occur;
3. Maintenance of its stewardship of resources and capabilities;
4. Compliance with safety and environmental laws, rules, and regulations;
5. Continued registration with ISO 14001 and OHSAS 18001.

Basic science and applied research seldom produce immediate results. Applications that touch the public often take many years. Hence, this endeavor requires a long-term perspective along with a commitment to continuous improvement in scientific research carried out with safe and environmentally sound operational practices. The Physics Department is committed to an active and comprehensive program of self-assessment to assure our continued excellence, and leadership in the scientific community.

ESSH Self-Assessment Program - Roles, and Responsibilities

Associate Laboratory Director, Nuclear & Particle Physics - The ALD is responsible for the management and oversight of the Physics Department's self-assessment program for Nuclear & Particle Physics Groups. The ALD is also responsible for submitting a year-end evaluation report to the Deputy Director for Science and Technology.

Department Chair - The Physics Department Chair is responsible for the development and implementation of a self-assessment program and the preparation of a year-end evaluation report for submission to the ALD for Nuclear & Particle Physics. The Department Chair shall appoint a Self Assessment Committee (SAC) and an Environmental Assessment Committee (EAC) to collect and evaluate information related to the defined measures. The Chair is also responsible and accountable for ensuring that appropriate corrective actions are taken to address identified weaknesses, commensurate with hazard, risk, vulnerability, and overall business objectives.

Staff - The staff (including guests and collaborators) is responsible for assessing and improving their work and work processes.

ESSH Self Assessment Committee - This Committee shall consist of at least the ESSH Committee Chair and ESH Coordinators who will collect and evaluate information related to the defined measures and report the results of this evaluation along with suggested measures for the following year to the Chair. The Committee evaluation includes measures and targets set by the Department's OHSAS 18001 program and includes a review of the Department's adherence to the 5 Core Functions of Integrated Safety Management (ISM) in the evaluation of work being performed. The Committee also reviews how we implement the Guiding Principles of ISM.

Environmental Assessment Committee - The EAC will consist of at least the Department Environmental Management System (EMS) Representative and the Environmental Compliance Representative. The EAC will collect and evaluate information related to the defined environmental measures and report the results of this evaluation along with suggested measures for the following year to the Chair. The EAC is responsible for ensuring that the EMS Compliance Assessment, the EMS System Assessment and the EMS Management Review are performed as required by ISO 14001.

Self-Assessment Program - Overview

The Physics Department's Self-Assessment Plan (SAP) for FY 2008 is based on the Laboratory's Critical Outcomes and Performance Measures. The Department assesses the elements that are relevant to its internal strategic plans, operations, and objectives, with the goal of enhancing the performance of the Physics Department and contributing to the Critical Outcomes of the Laboratory. As the primary mission of the Department is to facilitate the basic research and development activities of its scientific staff and the excellence of its research programs, the SAP emphasizes those areas critical to enhancing this mission. Essentially, the process entails:

1. The collection of data on the Department's performance measures;
2. The analysis of these data against the Department's objectives; and,
3. The implementation of appropriate corrective actions based upon the analysis.

The primary objective is to ensure that the all work is carried out in a safe, effective and environmentally sensitive manner. At the heart of this is a strong program of self-evaluation, the Tier I Program and a comprehensive Experimental Safety Review Process.

The Tier I Program, under the direction of the Physics Department's Manager of ESH&T Programs, achieves the BNL's departmental laboratory and office safety inspection requirements. It serves to ensure that individual Physics Department laboratories and offices comply with:

1. Physics Department rules and regulations;
2. The authorized use of an individual lab or office;
3. Safe operating envelopes as approved by the relevant Experimental Safety Review or Safety Assessment Documentation;
4. Building Facility Use Agreements;
5. Applicable external regulations.

These inspections also serve as an information gathering mechanism for performing the assessments required for the Department's EMS. The program involves Level 1, 2, and 3 managers, the DOE Facility Representative, the Environmental Compliance Representative, Group Safety Coordinators, other members of the department, and often, members of other departments and relevant subject matter experts.

The Department's ESSH Committee acts as the Experimental Safety Review Committee. As such, it evaluates the experimental activities for safety, environmental aspects, proper use of the facility, and reviews the training requirements of the individuals involved. The Physics Department plans and monitors its activities in accordance with the Subject Area, *Work Planning and Control for Experiments and Operations* using the framework of the 5 core functions of ISM. The Committee includes the elements of OHSAS 18001 by including risk analysis of the work being done.

The ESSH Committee also acts as the Accident/Incident Investigation Committee, an internal formal investigation committee that has developed measures to handle incidents that are notable violations of accepted Department procedures. In almost all cases these are not reportable

incidents. However, establishing the root cause and lessons learned is valuable for strengthening the overall ESSH program.

The Department has established and maintains an ISO 14001 compliant Environmental Management System (EMS). The Department performs an annual evaluation of its overall environmental performance, which includes an Environmental Management Assessment, a Regulatory Compliance Assessment, and an Environmental Management Review.

The Department has developed an OHSAS 18001 compliant Occupational Health and Safety System. The Department performs an annual evaluation of its overall OSH performance, which includes an OHSAS Management Assessment, a Compliance Assessment, and an OHSAS Management Review.

The Department's Corrective Actions are tracked in BNL's family Action Tracking System. This includes corrective actions for Tier I Inspection violations, those that result from internal and external audits, and those actions resulting from ESSH Committee, Group Safety Coordinator, or Department meetings.

Self-Assessment Program

Performance Measures for Brookhaven National Laboratory as established between the Department of Energy (DOE) and Brookhaven Science Associates (BSA)

There are eight performance measures that have been established. The Physics Department helps the Laboratory achieve its institutional goals by contributing at the departmental level to those measures that are applicable to the Department. Some performance goals are truly institutional and are not evaluated at the Department level.

Performance Measure 1.0 – Provide for Efficient and Effective Mission Accomplishment

The Physics Department continues to do its part in achieving ‘World Class Science’. Our discoveries and publications, recognition of our excellent scientists through awards and support, continues to bring recognition to BNL.

Physics Department scientists are internationally recognized leaders in their fields. They participate in developing new science initiatives at BNL and also participate in scientific endeavors at other facilities worldwide and in establishing direction with their global counterparts for the next generation of initiatives and research tools.

Performance Measure 2.0 – Provide for Efficient and Effective Design, Fabrication, Construction and Operations of Research Facilities

The Physics Department provides the expertise for design, fabrication, and construction of the major detectors for RHIC. These plans are reviewed at the laboratory level and with the DOE to ensure their effectiveness and efficiency. The funding received to accomplish these reflects the confidence of the DOE developed through the past projects we have been successful with.

The Physics Department operates the Accelerator Test Facility (ATF), a proposal-driven Program-Committee-reviewed Users'-Facility dedicated for long-term R&D in Physics of Beams. ATF users, from universities, national labs and industries, are carrying out R&D on Advanced Accelerator Physics and are studying the interactions of high power electromagnetic radiation and high brightness electron beams, including laser acceleration of electrons and Free-Electron Lasers. Other topics include the development of electron beams with extremely high brightness, photo-injectors, electron beam and radiation diagnostics and computer controls.

Operations at the ATF are reviewed annually by the Department and the DOE. DOE and Laboratory approvals for the upgrades, operations, and new capabilities demonstrate continued commitment to this facility for its remarkable achievements.

Performance Measure 3.0 – Provide Effective and Efficient Science and Technology Program Management

The Physics Department accomplishes this in partnership with the Laboratory management. The Laboratory Director, Deputy Director for Science and Technology, Deputy Director for Operations, the Associate Director for Nuclear and Particle Physics, the Associate Director for Policy and Strategic Planning work with the Physics Department Chair, Deputy and Associate Chairs to achieve this measure.

The Department works with Laboratory Management to develop new programs aligned with the DOE Mission and the scientific strengths of the Laboratory and participates in major projects at other laboratories worldwide. These programs are well received by our scientific partners and reviewers, globally, demonstrating the excellence of our personnel and programs. The ability to get funding for some of these underscores their relevance to both the scientific community and the DOE.

Projects that have been previously approved and funded in prior years receive continued funding attesting to their effectiveness and efficiency. These projects undergo rigorous annual reviews internally and externally.

Performance Measure 4.0 – Provide Sound and Competent Leadership and Stewardship of the Laboratory

The Physics Department's Chair, Deputy Chair, and Associate Chair assist the laboratory in achieving this measure by ensuring that Group Leaders and scientists are globally recognized as leaders in their fields. Additionally, the support personnel are chosen and retained for their demonstration of their quality of performance in supporting their leaders and commitment to excellence in stewardship of the Departments programs and assets.

Performance Measure 5.0 – Sustain Excellence and Enhance Effectiveness of Integrated Safety, Health, and Environment Protection

The Physics Department continues to provide a work environment that protects workers and the environment. The Department strives to keep its DART rate below the Laboratory average and below the DOE Office of Science expectation of 0.25 cases per 200,000 hours worked. We also work to keep our OSHA total recordable case rate below the laboratory average and below the Office of Science interim goal of 0.65 cases per 200,000 hours worked.

The Physics Department integrates ESSH into its policies and procedures providing a management system that enhances the safety and well-being of our personnel and the environment. We meet all the requirements established by the Laboratory and in addition have instituted proactive measures to control or eliminate risks. By measuring our own performance and soliciting feedback through our Group Safety Coordinators and Department members we can continuously improve that performance.

The Department is participating in the Laboratory's Human Performance initiative and has already implemented some elements into our programs. The Physics Department will ensure worker, scientist and technician participation in hazards assessment, evaluation and mitigation at the "task level." Job Risk Assessments will be reviewed and updated as deemed appropriate.

The Physics Department has developed an accident/incident management program where all incidents and accidents other than first aid cases are investigated. First aid cases are reviewed by the Physics Department's Manager of ESSH&T Programs to see if an investigation is warranted. The Group Leader owning the accident or incident has the responsibility to perform the initial investigation. The ESSH Committee reviews and provides further investigation, if necessary, develops corrective actions and lessons learned which are subsequently shared with Group Safety Coordinators and the entire Department at an 'all-hands' meeting.

The Physics Department manages its waste effectively and efficiently and participates in identifying 'Pollution Prevention' projects and 'Safety Solutions' projects. The Department has had success in attempts to find funding within these Laboratory programs but will also fund others on its own.

The Department maintains its ISO 14001 and OHSAS 18001 registration.

Performance Measure 6.0 – Deliver Efficient, Effective, and Responsive Business Systems and Resources that Enable the Successful Achievement of Laboratory Missions

The Physics Department performs its part in helping the Laboratory achieve this measure through its participation in acquiring and developing the Laboratory business systems that meet its needs and by providing feedback to the business division for the programs in place.

The Department has set up an efficient means of reviewing acquisitions and maintaining its property that meets all laboratory requirements and incorporates additional reviews for safety and management.

Personnel in the Physics Department are our most valuable resource. Much time is devoted to recruiting and hiring excellent people, and to mentoring and assisting them in their development, both professionally and personally. The Physics Department strives to enhance its diverse population in its hiring practices to ensure global participation in creating new ideas and tools that serve the needs of researchers worldwide.

The Physics Department invites external review from subject matter experts from Laboratory and DOE resources at BNL and participates openly in reviews from external agencies. The Department values these audits as validation of our excellent programs using any corrective actions or recommendations to provide the safest and healthiest working environment in the Laboratory and DOE complex.

Performance Measure 7.0 – Sustain Excellence in Operating, Maintaining, and Renewing the Facility and Infrastructure Portfolio to Meet Laboratory Needs

The Physics Department uses its resources in a most efficient and effective manner to maintain its infrastructure. We are involved in working with Laboratory Management to keep our operations in a safe and reliable condition. Our Tier I program includes inspection of infrastructure, developing any corrective actions, and relaying our needs to management.

Performance Measure 8.0 – Sustain and Enhance the Effectiveness of Integrated Safeguards and Security Management (ISSM) and Emergency Management Systems

The Physics Department participates in preparations for emergencies in concert with the Emergency Services Division. We keep them informed of our hazards and emergency needs for our people and equipment. Hazard placards are well maintained and people are trained as local emergency coordinators to assist as necessary. Experimental Safety Reviews require the principal investigator to list any emergency preparations or responses required for their work.

DOE property and equipment are properly managed. The Department also complies with all cyber security requirements. While the Department is not directly involved with classified or sensitive information, we strive to keep all our information and materials as secure as is reasonable. The Department has appointed its Manager of ESSH&T Programs as the ISSM point of contact to ensure effectiveness of this program.

Self-Assessment Program – Areas Assessed

This year a comprehensive review will be undertaken in the following areas: Communications, Training, Leadership, Tier I Inspection Program, 10CFR851 Violations, Industrial Hygiene Monitoring, ESSH Committee and Work Planning, Security, Cyber Security, Accident and Incident Management, Corrective Action Management, Accelerator Test Facility (ATF) issues, Memoranda of Understanding (MOUs), Group Safety Coordinator (GSC) Program, Environmental Performance, Summer Student Monitoring, and Safety Observations. Additionally, we work with the Condensed Matter Physics and Materials Science Department of the BES Directorate to assess our performance in handling many of their ESSH functions as outlined in MOUs established last year.

The results of internal/external audits, with the planned assessments will be documented in a self-evaluation that will be conducted in the 1st quarter of FY 2009.

The recommendations from the FY 2007 Self-Evaluation and the Objectives and Targets for EMS and OHSAS are listed below and will be implemented and addressed in the FY 2008 Self-Evaluation.

Recommendations/Goals for FY 2008

Machines and Equipment

1. Remove 1 Physics Department machine shop
2. Reduce at least 4 machines in the Physics Department's machine shops
3. Reduce the number of machines in the Central Fabrication Division's satellite shop
4. Re-arrange the machines in the CS satellite shop to move them away from the breakers and switches
5. Provide magnetic anti-restart devices (2/3) or signs for all our remaining machines
6. Evaluate and approve at least 50% of the electronic equipment as a NRTL goal
7. Conduct a joint GSC/Machine Shop User Meeting where the main topic is PPE – especially for machine shops with proper eyewear (including staging PPE) and for using gloves when using sharps

Clean-ups and Storage

8. Sample and clean at least 2 labs for heavy metal contamination and decontaminate if necessary.
9. Recycle 1000 lbs. of excess lead in the building 510 basement.
10. Remove >50% of spray cans in labs with the focus on those that will not be used in the next year.
11. Evaluate storage and usage of chemicals in 4 labs or work areas (1 per quarter) – define the storage space.
12. Identify and fund 1 lab cleanout.
13. Identify locations to place lead cleaning supplies for lead soldering stations

Cyber Security

14. Some computer systems are lacking responsible system administrators (SA). We are instituting a list of "official SAs" and assuring that every system is administered by someone on the list.
15. We will have all our laptops with property passes are encrypted and will work to get encryption on many of the others.
16. Longer term, ITD is pressuring to centralize the administration of all UNIX systems. We must either show that our systems already meet the goals of this centralizing project or we must install their centralization tools.

ESRs

17. Convert at least 50% of the ESRs to the on-line form.
18. Add checkboxes for mercury, nano-materials, and greenhouse gas emissions use or disposal to the ESR form.
19. Review controls for experiments that indicate use or disposal of above pollutants.
20. Add IH monitoring considerations to ESR form.
21. Solicit Human Performance information in planning stage of experiments.
22. Solicit Human Performance information in worker feedback.

Tier I Inspections

20. Invite Industrial Hygiene (IH) Representative on 4 Tier 1 inspections.
21. During inspections, identify processes for potential monitoring.
22. With IH help, perform personnel monitoring of 4 targeted processes.

Group Safety Coordinators

23. Increase the number of GSC meetings to 2 or 3 this year.

Accident/Incident Management

24. Target slips-trips-and-falls, aiming for zero injuries of this type. PPE issues shoes can be addressed. To get to the next level, we really do have to think about our walking habits and chosen pathways, etc.
25. Perform a number of Safety Observations and get all Level 2 Managers trained.

Communications

There is a strong Line Management Commitment to safety through the discussion and review of ESSH topics at each Department Administration Meeting (weekly), Department Group Leader Meetings (2-4 per year), Group Safety Coordinator Meetings (2-4 per year), Department Group Meetings (varied depending on group – quarterly suggested), and at Department 'All Hands' Meetings (3 or more as needed). These meetings always include a safety topic, with a goal of reaching every employee. The meetings include safety issues as a principal component of discussion, usually first. Any issues that cannot be resolved or are deemed significant are passed up to the Department Chair or ESSH Committee, as appropriate, for follow up and corrective action.

The Department's ESSH Committee meets to assess the performance of the Department, review radiological and environmental compliance, review and update ESSH documentation, and establish, track, and ensure the implementation of any corrective actions it deems necessary. The ESSH Committee reviews and approves the experiments performed in Physics Department space and inspects the laboratories where that work is done.

Each group selects a Group Safety Coordinator (GSC) so that a cross-section of work functions (technicians, administration representatives, engineers, and scientists) is represented to provide a channel for employee feedback. A subset of the ESSH Committee meets with the Group Safety Coordinators to pass down information, explain programs and receive feedback about the ESSH state of the Department and the viability of the programs. Specifically we plan to have the GSCs provide input on laboratory and Department ESSH issues and policies, and identify opportunities for improvement in the workplace. They also will periodically review ESSH and self-assessment data and serve as a vehicle for expression of staff ESSH concerns/issues

Training

The Physics Department plans to continue to maintain or improve the current level of training completion for employees at or above the 97% level. The training completion rate goal for guests and contractors will be 90% or better. This will be tracked by Department Training Coordinator and reported at Department management meetings. Some of the people in the Department will receive Human Performance Training to begin the transition of including Human Performance elements into our policies and procedures, and our accident/incident investigations.

Leadership

Individual performance goals will reflect directorate and department ESSH goals, and staff will be evaluated against these goals. Examples: compliance with ESSH and training requirements, PI participation in Tier 1s, identification and correction of hazards, response to audit and investigation findings, frequency of injuries and accidents. The Safety and Training Office will provide statistics to all Group Leaders and The Department Chair for this purpose.

The Department maintains a strong representation on nearly all the ESSH Subject Area Development Groups, Laboratory Level Working Groups (Laboratory ES&H Committee, Laser Safety Committee, Training Steering Committee, Radiation Protection Committee, etc.), and is active in the development of Laboratory policy.

Tier I Inspection Program

The Tier 1 Inspection program is a mature program. Nonetheless, the Department remains alert for opportunities to improve the program. To that end, we will implement the following:

1. Trending the results;
2. Ensure PI participation in inspections of their labs;
3. Incorporation of ESR and SOP random reviews into the Tier 1 process.

Work Planning

The Department will continue to reinforce the need for compliance with the Work Planning and Control for Experiments and Operations Subject Area. The current level of compliance will be assessed and improvement actions identified.

Security

The Physics Department will assure compliance with SECON security requirements. In particular, assure all laboratory and office doors shall be locked outside of working hours. Noncompliance reports will be given to the Department Chair and Group Leaders of the responsible individuals. This information will be made available for inclusion in performance evaluations.

The Department Chair and Group Leaders will assure that all appropriate material is adequately safeguarded, e.g., radioactive materials, drugs, and materials and equipment of high commercial value.

Accident and Incident Management

The Physics Department will take an active role in Accident and Incident Management by reviewing all incidents and accidents that occur in the Department, regardless of their reporting status, in an effort to proactively reduce situations where accidents or incidents may occur. The Department Chair determines the level of investigation of all accidents and incidents and charges either the ESSH Committee or another group to investigate and submit a written report. As part of the investigation, the ESSH Committee routinely charges the Group Leader of the group where the accident/incident occurred to perform an initial investigation and produce a written report to the Committee. This ensures that line management takes an active part in accident investigations. Additionally, the Department of Energy's Brookhaven Area Office will be informed through their Physics Facility Representative who is an ex-officio member of the ESSH Committee

Human Performance elements will be included in our investigations using appropriate causal analysis methods.

Information from the investigations will be disseminated to all Department personnel along with any Lessons Learned. Incidents and accidents will be discussed with Group Safety Coordinators for their input and feedback.

The Safety and Training Office will electronically distribute to all Physics Personnel information gathered and published monthly by the Assistant Laboratory Director for ESH&Q, to keep them apprised of safety and other incidents in the Laboratory.

Accelerator Test Facility (ATF) Issues

The SA evaluation team will look at the ATF as a separate entity since it is our only facility. This will involve the ESSH Committee Chair, ESH Coordinators, and ATF personnel. The goal is to get feedback relevant to the ATF so its concerns are included in the larger department roll-up.

Memoranda of Understanding (MOU)

The Physics Department generates MOUs for inter-departmental work. This is intended to define the responsibilities of each department with respect to Tier I Inspections, Work Planning and Control, ESRs, and infrastructure. The Physics Department will review its current MOUs and will renew or update those that are 3 or more years old. Where appropriate, we will add LEP verbiage to the MOU. The Safety and Training Office will determine if inter-departmental situations exist that are currently not defined by MOUs and generate them where necessary.

Group Safety Coordinator (GSC) Program

The Group Safety Coordinator Program is a reasonably mature program intended to solicit more employee involvement in safety issues. GSCs use this forum to bring ESSH issues to line management. While the program works very well, attendance is not as good as we would like it to be. We will try to arrange GSC meetings at times that will better accommodate the schedules of the members.

Environmental Performance

The Physics Department will do its part to maintain the laboratory-wide ISO 14001 registration and strive to continually improve the Environmental Management System. Our goals are to be in full compliance with all applicable environmental requirements and to continue efforts to identify pollution prevention opportunities.

The Physics Department will continue to manage its waste well and will reduce the unneeded chemicals and materials in the Department. Over the past few years, the waste generated has been below projections that the Environmental and Waste Services Division provides.

The Department plans to continue to remind its personnel of the problems associated with the dumping of household goods and garbage in the Physics Department dumpsters. In addition to compliance issues there are costs associated with clean-ups and fines are possible.

OHSAS Performance

The Physics Department has achieved OHSAS 18001 registration. The ESH Coordinators will monitor the system performance that includes tracking and trending injuries, reviewing FRAs and JRAs, and other specific measures as defined in the OHSAS Management Plan. Facility and Job Risk Assessments are reviewed periodically. The review includes: removing FRAs and JRAs that are no longer relevant to the work being performed in the Department; adding new or more detailed assessments as needed; re-evaluation of FRAs and/or JRAs following an incident or

injury. A summary of the FRA and JRA changes is presented to management during the annual Management Review. Additionally, PIs will include a risk assessment of the activities as part of the ESR process. Any risks not consistent with established JRAs will initiate a re-assessment of that JRA. This process may also result in development of new JRAs. Progress during the year is reported in weekly management meetings.

Summer Student Monitoring

The Physics Department recognizes the additional risk posed by inexperienced people working in areas where hazards are present. In an effort to manage this, the Physics Department's Safety & Training Office will maintain a list of summer students and the ESH Coordinator will visit summer students during their time in the Department in order to assess their working conditions and their understanding of the hazards they are working with. This will be an informal assessment, however, if deficiencies are found, they will be corrected in concert with the student's host.

Safety Observations

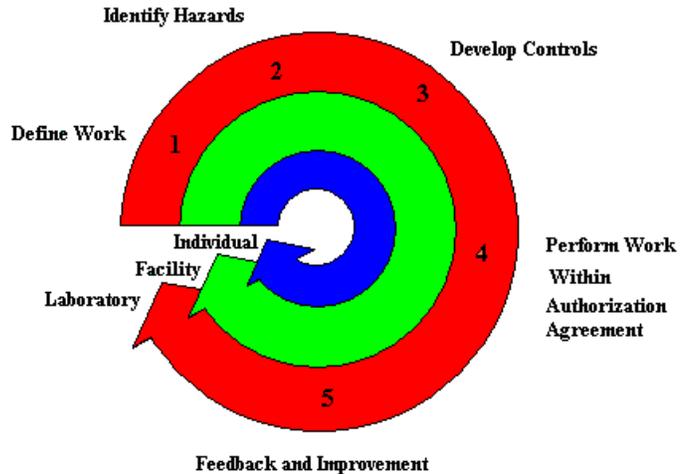
The Physics Department's Managers are committed to performing Safety Observations in order to encounter individuals in their work environment in order to address any safety issues they may have and to inquire how they ensure they are working safely within established envelopes. Our goal is for 4 observations each by the Chair, Deputy Chair, Associate Chair, and the Manager of the ESH&T Programs. These will overlap with the Safety Observations of the ALD of NPP throughout our Directorate.

Self-Assessment Evaluation Overview

The Physics Department has a policy that mandates certain annual assessments be included in the annual Self-Evaluation, in conjunction with or in addition to the BNL required assessments. These are given below.

Integrated Safety Management Assessment

The Physics Department has established an ISM Assessment for its self-evaluation process. This assessment will include adherence to the 5 core functions in our work planning process (our ESR form is organized into the 5 core functions) and how the Department accomplishes incorporation of the Guiding principles into all we do.



Corrective Action Management Assessment

The Department will institute a Corrective Action Management Assessment that goes beyond the BNL requirements. This system will look at incidents that occurred over the last few years and evaluate the effectiveness of the corrective actions that were developed and closed out as having been completed. Furthermore, we will determine the appropriateness of those corrective actions and report the results in our annual Self-Evaluation.

Environmental Management System Assessments

Compliance Assessment

Tier I inspections serve as an information gathering mechanism for the EMS Compliance Assessment. The Department EMS Representative (DER) and the Environmental Compliance Representative (ECR) serve as members of the inspection team and represent the EAC whenever such information is gathered. The goal is to complete inspections of two laboratory or shop areas during the first quarter of the fiscal year.

The DER updates the list of satellite accumulation areas and check for compliance by visiting each area. The ECR acts in a supporting role, if necessary. The goal is to complete this activity during the second quarter of the fiscal year.

Non-Compliances are reported to the Department Chair and others as appropriate. Finding significant problems may require convening an additional Management Review. If such a review is deemed necessary, it is held as soon as possible after the problem has been identified.

Records of the Compliance Assessment are maintained with other self-assessment records.

System Assessment

Evaluate Documents. The EMS document evaluation normally takes place in December – January. This coincides with the annual Experiment Safety Review "cycle," when ESR procedures and forms are examined, evaluated and modified if necessary. The DER and the Department ESSH Committee includes an evaluation of EMS documents as part of this assessment. The ECR has a supporting role. The Department ESSH Committee must approve any changes.

Evaluate Operations. Tier I inspections can function as an opportunity to observe operations and to interview workers. The DER and ECR are part of the Tier I team during these evaluations. The goal is to complete two evaluations during the fiscal year.

System Audit. A formal audit of all the elements of the EMS is performed at least every three years. This may be accomplished by audits of subsets of the EMS elements each year. A qualified auditor or an audit team performs the audit. A qualified auditor who is external to the Physics Department leads the audit team.

The results of the System Assessment are documented in a formal report to the Department Chair within 60 days of the completion of the assessment. Finding significant problems may require convening an additional Management Review. If such a review is deemed necessary, it is held as soon as possible after the problem has been identified.

Records of the System Assessment are maintained with other self-assessment records.

Management Review

The results of the Compliance and System Assessments are used by the DER as input to the Management Review. The Management Review may also be held at the Directorate level, at the request of the relevant Associate Laboratory Director. Additional Management Reviews may be scheduled as necessary as a result of findings of the Compliance and System Assessments. Such meetings may be called at the discretion of the Laboratory Management, Directorate Management, Department Management, or Assessment Team(s).

Records of the Management Review, including minutes of the meeting are maintained with other self-assessment records. Recommendations and corrective actions that are identified as a result of this review are tracked to completion through BNL's Physics FATS (Family Action Tracking System).

OHSAS Management System Assessments

Compliance and System Assessments

These assessments are carried out as required by the OHSAS 18001 system and include both internal and external assessments and audits. The scope and timing of these assessments is determined in coordination with the BNL ESH&Q Division.

Management Review

The results of the Compliance and System Assessments are used by the ESH Coordinator as input to the Management Review. The Management Review may also be held at the Directorate level, at the request of the relevant Associate Laboratory Director. Additional Management Reviews may be scheduled as necessary as a result of findings of the Compliance and System Assessments. Such meetings may be called at the discretion of the Laboratory Management, Directorate Management, Department Management, or Assessment Team(s).

Records of the Management Review, including minutes of the meeting are maintained with other self-assessment records. Recommendations and corrective actions that are identified as a result of this review are tracked to completion through BNL's Physics FATS.

Safety Assessments

Tier I Program

The Tier I Program, under the direction of the Manager of ESH&T Programs, achieves BNL's Departmental Laboratory and Office safety inspection requirements and serves to ensure individual Physics Laboratories and Offices

- a. Comply with Physics Department rules and regulations,
- b. Adhere to the posted authorized use of an individual lab or office,
- c. Conform to the safe operating envelopes as granted by the Experimental Safety Review,
- d. Conform to building infrastructure use.

These inspections also serve as an information gathering mechanism for performing the assessments required for the Department's EMS. The program involves Level 1, 2, and 3 managers, other departments, the DOE Facility Representative, the Environmental Compliance Representative, Group Safety Coordinators, and other members of the department.

Experimental Safety Review Program

The Department plans and monitors most of its activities under the Work Planning and Control for Experiments and Operations Subject Area. The Department's ESSH Committee acts as the Experimental Safety Review Committee, which evaluates the activities for safety, environmental aspects, proper use of the facility, and a review of the training requirements of the individuals involved in the projects. The review requires a waste minimization plan and the Committee looks for pollution prevention opportunities while reviewing individual experiments and systematically

while comparing similar experiments. The review is comprehensive since it involves feedback from those working on the project and also a visual inspection of the laboratory area by Committee members.

Item Specific Audits

The results of the following specific audits are reported in the Minutes of the ESSH Committee:

1. Chemical Audit - Annual, by all Department Chemical Owners and the ESH Coordinator.
2. Dose Reviews - Semi-annual for individuals, quarterly for ATF area monitors, by the ESSH Committee.
3. Department ESSH Policy Audits - Annual, by the ESSH Committee.
4. Sealed Source Audits - Semi-annual for non-exempt sources, annual for exempt sources, by the ESH Coordinator.
5. Hazard Placard Audit - Annual, by the ESH Coordinator.

Excellence in ESSH: Areas identified in the Self-Assessment Plan

Monitoring these distinct areas will provide the assessment of the operational excellence of the Physics Department's ESSH program. These activities were selected to represent important areas of concern to the Department and to demonstrate the management commitment to the ESSH and Self-Assessment programs.

The areas are:

- Communications,
- Training,
- Leadership,
- Tier I Inspection Program and 10CFR851 Compliance,
- Industrial Hygiene Monitoring
- ESSH Committee and Work Planning,
- Security, and Cyber Security
- Accident and Incident Management,
- Corrective Action Management
- Accelerator Test Facility (ATF) issues,
- Memoranda of Understanding (MOUs),
- Group Safety Coordinator (GSC) Program,
- Safety Observations
- Environmental and OHSAS registration performance, and
- Summer Student Monitoring.

The success of each of these activities can be gauged by several measures that involve input from personnel spanning the whole of the Department. Collecting and evaluating these measures is viewed as a value-added exercise that will lead to genuine improvements in the operation and performance of the Department's ESSH program and may well impact other facets of the Department.

Acronyms

ALARA	As Low As Reasonably Achievable
ALD	Associate Laboratory Director
ATF	Accelerator Test Facility
ATS	Action Tracking System
BES	Basic Energy Sciences
BTMS	Brookhaven Training Management System
CMPMS	Condensed Matter Physics and Materials Science
DART	Days Away Restricted or Transferred
DER	Department EMS Representative (R. Gill)
DOE	Department of Energy
EAC	Environmental Assessment Committee (R. Gill and M. Van Essendelft)
ECR	Environmental Compliance Representative (M. Van Essendelft)
EMS	Environmental Management System
ESH	Environment, Safety, and Health
ESH&Q	Environment, Safety, Health & Quality
ESR	Experimental Safety Review
ESSH	Environment, Safety, Security, and Health
FATS	Family Action Tracking System
FRA	Facility Risk Assessment
GSC	Group Safety Coordinator
ISM	Integrated Safety Management
ISSM	Integrated Safeguards and Security Management
ISO	Independent Standards Organization
JRA	Job Risk Assessment
LEP	Local Emergency Plan
MOU	Memorandum of Understanding
NPP	Nuclear & Particle Physics
OSHA	Occupational Safety and Health Administration
OHSAS	Occupational Health and Safety Assessment System
PI	Principal Investigator
RF	Radio Frequency
SAC	Self Assessment Committee
SAP	Self Assessment Plan
SBMS	Standards Based Management System
SECON	Security Conditions
SOP	Standard Operating Procedures
R2A2	Roles, Responsibilities, Authorities, and Accountabilities
R&D	Research and Development